

OFFICE OF THE ATTORNEY GENERAL
120 SW 10TH AVENUE, 2ND FLOOR, TOPEKA, 66612-1597
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CEVC
FY 2006

FINANCIAL STATUS REPORT

(Due 15 Days After Close of Each Month, or the First Business Day, by 5:00 PM)

The information provided on this report will be used to monitor grantee cash flow.
No further monies or other benefits may be paid out under this program unless
this report is completed and filed as required by existing law and regulations.

| | | | |
|--|--|--|---|
| 1. NAME AND ADDRESS OF SUBGRANTEE ORGANIZATION | 2. GRANT PROJECT NUMBER | 3. VENDOR IDENTIFICATION NUMBER OR FEDERAL EMPLOYER IDENTIFICATION NUMBER | 4. FINAL REPORT <input type="checkbox"/> YES <input type="checkbox"/> NO |
| | 5. BASIS OF ACCOUNTING <input type="checkbox"/> Cash <input type="checkbox"/> Accrual | 6. PROGRAM PERIOD (MO, DAY, YR) FROM: 7 / 1 / 2005 TO: 6 / 30 / 2006 | 7. REPORT PERIOD (MO, DAY, YR) FROM: / / TO: / / |

GRANT FUND EXPENDITURES AND OBLIGATIONS BY BUDGET CATEGORY

| BUDGET CATEGORY | APPROVED BUDGET | PERIOD EXPENDITURES | TO DATE EXPENDITURES | CARRY-OVER | OBLIGATIONS | FUNDS REMAINING |
|---|-----------------|---------------------|----------------------|------------|-------------|-----------------|
| A. Personnel Expenditures | | | | | | |
| B. Fringe Benefit Expenditures | | | | | | |
| C. Travel Expenditures | | | | | | |
| D. Supplies & Communications Expenditures | | | | | | |
| E. Facility Costs | | | | | | |
| F. Equipment Expenditures | | | | | | |
| G. Contractual Expenditures | | | | | | |
| H. Other | | | | | | |
| I. Total | | | | | | |

CERTIFICATION

| | | | | | | |
|---|--|--|--|---------------------------------------|--------|---------------|
| CERTIFICATION I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THIS REPORT IS CORRECT AND COMPLETE AND REPRESENTS ACTUAL EXPENDITURES OF FUNDS FOR THE PERIOD COVERED AND FOR THE GRANT TO DATE. | AUTHORIZED CERTIFYING OFFICIAL (Type or Print) | | TELEPHONE NUMBER | | | |
| | SIGNATURE | | DATE | AREA CODE | NUMBER | EXT. |
| | FISCAL OFFICER (Type or Print) | | FOR OFFICE OF THE ATTORNEY GENERAL USE | | | |
| | SIGNATURE | | DATE | Approved by Attorney General's Office | | DATE APPROVED |